

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0410803	LITTLE NOISES DAY CARE, LLC			NTNC	44	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
41 W.F. PALMER ROAD				1				
Towns Served: EAST HADDAM								

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		

Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Lead And Copper (PBCU)		5 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	

Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0410803	LITTLE NOISES DAY CARE, LLC			NTNC	44	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
41 W.F. PALMER ROAD			1				

Towns Served: EAST HADDAM

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Organic Chemicals (VOCS)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2018	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		LNDC001	INFANT ROOM	A	Y	2		
		LNDC0010	KITCHEN SINK 2	A		N		
		LNDC0011	GIRL BATH	A		N		
		LNDC0012	BOYS BATH	A		N		
		LNDC002	INFANT ROOM KITCHEN	A	Y	2		
		LNDC003	TODDLER ROOM	A	Y	2		
		LNDC004	TODDLER ROOM 2	A	Y	2		
		LNDC005	HANDICAP STAFF BATH	A	Y	2		
		LNDC006	PRE-SCHOOL	A	Y	2		
		LNDC007	PRE-SCHOOL 2	A	Y	2		
		LNDC008	STAFF BATH	A		N		
		LNDC009	KITCHEN SINK	A		N		
		SCC001	KITCHEN SINK	I	Y			
		SCC002	SCHOOL AGE SINK	I				
		SCC003	HANDICAP BATH	I				
		SCC004	PRESCHOOL LEFT	I				
		SCC005	PRESCHOOL RIGHT	I				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10191	WELL	2	WELL	A				
50400	BLADDER TANK							

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0410803	LITTLE NOISES DAY CARE, LLC			NTNC	44	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
41 W.F. PALMER ROAD			1				
Towns Served: EAST HADDAM							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
OWENS, EDWIN	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR	9/30/2020

Contact Information

Name				Organization		Job Title			
Ms. Kim Owens				Little Noises Day Care, LLC		Owner/Member			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
41 William F. Palmer Road			P.O. Box 732			Moodus		CT	06469
Business Phone		Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-873-9848			860-873-1036		860-301-8129	littlenoisesdc@aol.com			

Contact Role(s): Administrative Contact, Legal Contact, Owner

Name				Organization		Job Title			
Mr. Edwin Owens				Little Noises Day Care		Member			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
41 W.F. Palmer Road						Moodus		CT	06469
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-873-9848			860-873-1036			860-301-8128	Kimowe1522@att.net		

Contact Role(s): Owner

Name				Organization		Job Title			
Ms. Brenda L. Owens				Little Noises Day Care, LLC		Member			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
41 William F. Palmer Road						Moodus		CT	06469
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-873-9848			860-873-1036			860-305-4759			

Contact Role(s): Owner

Name				Organization		Job Title			
Mr. Jerry R. Owens				Little Noises Day Care, LLC		Owner/Member			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
41 William F. Palmer Road						Moodus		CT	06469
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-873-9848			860-873-1036			860-727-2091			

Contact Role(s): Owner

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419013	EAST HADDAM ELEMENTARY SCHOOL			NTNC	600	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
JOE WILLIAMS ROAD				1				

Towns Served:

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		10 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00701)**

Nitrate (1040)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Nitrite (1041)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419013	EAST HADDAM ELEMENTARY SCHOOL			NTNC	600	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
JOE WILLIAMS ROAD				1				

Towns Served:

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00701)

Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		ES-00	JOE WILLIAMS ROAD	A	Y			
		ES-01	STAFF BATHROOM SINK	A	Y	1		
		ES-02	NURSES OFFICE SINK	A	Y	1		
		ES-03	GIRLS BR SINK 200	A	Y	1		
		ES-04	BOYS BR SINK 200	A	Y	1		
		ES-05	KITCHEN SINK	A	Y	1		
		ES-06	GIRLS BR SINK100	A	Y	1		
		ES-07	BOYS BR SINK 100	A	Y	1		
		ES-08	ROOM 102 BR SINK	A	Y	1		
		ES-09	ROOM 104 BR SINK	A	Y	1		
		ES-10	GIRLS BR SINK 300	A	Y	1		
		ES-11	BOYS BR SINK 300	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00701	ENTRY POINT	3	ENTRY POINT	A				
57619	WELL #2	2	WELL #2	A				
57621	WELL # 3	2	WELL # 3	A				
57623	ATMOSPHERIC STORAGE							
57625	BOOSTER PUMP STATION							

Certified Operator Information

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419013	EAST HADDAM ELEMENTARY SCHOOL			NTNC	600	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
JOE WILLIAMS ROAD			1				

Towns Served:

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: **SMALL WATER SYSTEM**

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

Contact Information

Name				Organization		Job Title		
Mr. Brian S. Reas				East Haddam Public Schools		Superintendent.		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
26 Plains Road			P.O. Box 401			Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-873-5090		860-873-5092			brian.reas@easthaddamschools.org			

Contact Role(s): **Administrative Contact, Legal Contact**

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419023	EAST HADDAM MUNICIPAL CENTER			NTNC	154	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1 PLAIN ROAD					1			

Towns Served:

Monitoring Requirements

Water System Facility: DISTRIBUTION (WSF ID: 00600)

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
DISTRIBUTION (4)	1/1/18 - 12/31/26		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		10 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
DISTRIBUTION (4)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Organic Chemicals (VOCS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

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CT0419023	EAST HADDAM MUNICIPAL CENTER			NTNC	154	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
1 PLAIN ROAD					1			

Towns Served:

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Organic Chemicals (VOCS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Organic Chemicals M&R Violation	7/1/18 - 9/30/18	3	11/19/2019		11/29/2019	
Pesticides, Herbicides and PCBs - Phase M&R Violation	7/1/18 - 9/30/18	3	11/19/2019		11/29/2019	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION	4	DISTRIBUTION	A	Y			
		DOWNSTREAM	DISTRIBUTION DOWNSTR	A	Y			
		UPSTREAM	DISTRIBUTION UPSTREA	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
10193	WELL #1 - HALE WELL	2	WELL	A				
10866	WELL #2 - RAY WELL	2	WELL 2	A				
60821	STORAGE							

Certified Operator Information

Water System Facility: DISTRIBUTION (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

Contact Information

Name		Organization		Job Title		
Mr. Emmett Lyman		Town of East Haddam		First Selectman		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
1 Plains Road		P.O. Box 385		Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT0419023	EAST HADDAM MUNICIPAL CENTER	NTNC	154	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
1 PLAIN ROAD				1	
Towns Served:					
860-873-5021		860-873-5025	860-885-8046	admin@easthaddam.org	
Contact Role(s): Owner					
Name		Organization		Job Title	
Ms. Linda Zemienieski		Town of East Haddam		Executive Assistant	
Mailing Address Line One		Mailing Address Line Two		City	State
1 Plains Road		P.O. Box 385		Moodus	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-873-5021		860-873-5025		860-885-8046	admin@easthaddam.org
Contact Role(s): Legal Contact					
Name		Organization		Job Title	
Mr. Ronald Turner		Town of East Haddam		Director of Ops.	
Mailing Address Line One		Mailing Address Line Two		City	State
1 Plains Road		P.O. Box 385		Moodus	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-873-5090					ronald.turner@easthaddam.org
Contact Role(s): Administrative Contact					

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419033	LITTLE VILLAGE PRESCHOOL			NTNC	34	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 PLAINS ROAD				1			

Towns Served:

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/25		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)		1 routine (RT) per quarter	
Di(2-Ethylhexyl) - Adipate (2035)			
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19	1/1-12/31	Waiver

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419033	LITTLE VILLAGE PRESCHOOL			NTNC	34	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 PLAINS ROAD					1			

Towns Served:

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Organic Chemicals (VOCS)	1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification		PN Certification	
			Required	Performed	Due to DPH	Received
Pesticides, Herbicides and PCBs - Phase M&R Violation	10/1/16 - 12/31/16	3	4/13/2018		4/23/2018	
Total Coliform M&R Violation	11/1/16 - 11/30/16	3	4/13/2018		4/23/2018	
E. Coli	7/1/17 - 9/30/17	3	1/16/2019		1/26/2019	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
00700	ENTRY POINT	3	ENTRY POINT	A				
10194	WELL	2	WELL	A				
51371	PRESSURE STORAGE							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2019

Contact Information

Name				Organization			Job Title		
Mr. Michael Maus				M & D Properties, LLC.					
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
P.O. Box 172						Hadlyme		CT	06439
Business Phone		Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
			860-873-2584	860-395-7956		michaelmausd@comcast.net			
Contact Role(s): Administrative Contact, Legal Contact									

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419033	LITTLE VILLAGE PRESCHOOL			NTNC	34	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
14 PLAINS ROAD				1			

Towns Served:

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419043	KINDERCARE LEARNING CORP OF MOODUS			NTNC	100	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
99 LEESVILLE ROAD				2				

Towns Served:

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Chlordane (2959)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419043	KINDERCARE LEARNING CORP OF MOODUS			NTNC	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
99 LEESVILLE ROAD			2				

Towns Served:

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) **1 routine (RT) per three years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/20 - 12/31/22		

Organic Chemicals (VOCS) **1 routine (RT) per three years**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		

Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7 PH	4
Start Date: 1/1/2002	Compliance History:	Operating Limit	Monitoring
	Monitoring Period	Compliance Status:	Compliance Status:
	11/1/2018 - 11/30/2018		N
	12/1/2018 - 12/31/2018		N
	1/1/2019 - 1/31/2019		N
	2/1/2019 - 2/28/2019		N
	3/1/2019 - 3/31/2019		
	4/1/2019 - 4/30/2019		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	9/11/2015	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2017	
CROSS CONNECTION EXEMPTION	3/1/2020	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
90th Percentile Copper Exceedance	1/1/14 - 12/31/16	2	5/24/2017		6/3/2017	
Lead and Copper TT Violation	4/1/17 -	2	2/10/2018		2/20/2018	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MW007-1	STAFF BATHROOM	A	Y	N		
		MW007-2	INFANT	A	Y	N		
		MW008	TODDLER YOUNG	A	Y	N		
		MW011	TODDLER OLD	A	Y	N		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419043	KINDERCARE LEARNING CORP OF MOODUS			NTNC	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
99 LEESVILLE ROAD			2				

Towns Served:

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
		MW012	PRESCHOOL 3	A	Y	N		
		MW027	PLAY ROOM	A	Y			
		MW027-PLY	PLAY ROOM	A	Y		Y	
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10196	WELL 2	2	WELL 2	A				
46378	CHILDRENS DISCOVERY TREATMENT STATION							

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: **SMALL WATER SYSTEM**

Operator Name	Operator Type	Certification(s)	Certification Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021
LAFRAMBOISE, JEFFREY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2020

Contact Information

Name			Organization			Job Title		
Ms. Michelle J. Gibbs			KinderCare Learning Corp			Director		
Mailing Address Line One		Mailing Address Line Two			City		State	Zip Code
99 Leesville Road					Moodus		CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-873-9666		860-873-3215			mgibbs@kinderCare.com			

Contact Role(s): **Administrative Contact**

Name			Organization			Job Title		
Mr. Myron R Bernstien 2Nd			99 Leesville Rd			Owner		
Mailing Address Line One		Mailing Address Line Two			City		State	Zip Code
14 Neptune Court					New London		CT	06320
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			

Contact Role(s): **Legal Contact, Owner**

Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419073	NATHAN HALE-RAY HIGH SCHOOL			NTNC	461	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SCHOOL DRIVE			1				

Towns Served:

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/18 - 12/31/20	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419073	NATHAN HALE-RAY HIGH SCHOOL			NTNC	461	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SCHOOL DRIVE				1				

Towns Served:

Monitoring Requirements

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Organic Chemicals (VOCS)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CROSS CONNECTION SURVEY REPORT	3/1/2019	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		HS-00	15 SCHOOL DRIVE	A	Y			
		HS-01	STAFF BATHROOM SINK	A	Y	1		
		HS-02	NURSES OFFICE SINK	A	Y	1		
		HS-03	BOYS BR SINK	A	Y	1		
		HS-04	GIRLS BR SINK	A	Y	1		
		HS-05	KITCHEN SINK	A	Y	1		
		HS-06	ROOM 114 SINK	A	Y	1		
		HS-07	ROOM 113 SINK	A	Y	1		
		HS-08	ROOM 115 SINK	A	Y	1		
		HS-09	ROOM 117 SINK	A	Y	1		
		HS-10	BOYS BR SINK 2FL	A	Y	1		
		HS-11	GIRLS BR SINK 2FL	A	Y	1		
		HS-12	STAFF BR SINK 2FL	A	Y	1		
		HS-13	MEDIA CNTR OFFICE	A	Y	1		
		HS-14	ROOM 134 SINK	A	Y	1		
		HS-15	ROOM 137 SINK	A	Y	1		
		HS-16	ROOM 142 SINK	A	Y	1		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10198	WELL #3	2	WELL #3	A				
10199	WELL #2	2	WELL #2	A				
1211	NATHAN HALE-RAY HIGH SCHOOL TREATMENT							
54274	ATMOSPHERIC STORAGE							
59020	PUMP STATION							
59022	BLADDER TANKS							

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419073	NATHAN HALE-RAY HIGH SCHOOL			NTNC	461	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
15 SCHOOL DRIVE			1				

Towns Served:

Certified Operator Information

Water System Facility: NATHAN HALE-RAY HIGH SCHOOL TREATMENT (WSF ID: 1211)

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

Contact Information

Name				Organization		Job Title		
Mr. Brian S. Reas				East Haddam Public Schools		Superintendent.		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
26 Plains Road			P.O. Box 401			Moodus	CT	06469
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-873-5090		860-873-5092			brian.reas@easthaddamschools.org			

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0410334	GOODSPEED OPERA HOUSE			NTNC	150	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
6 MAIN ST (RTE 82)					1			

Towns Served: EAST HADDAM

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0410334	GOODSPEED OPERA HOUSE			NTNC	150	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
6 MAIN ST (RTE 82)				1			
Towns Served: EAST HADDAM							

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Organic Chemicals (VOCS)	1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		GEL BAR	GELSTON MAIN BAR	A	Y	2		
		GEL KITCHEN	GELSTON KITCHEN	A	Y	2		
		GOH BAR	GOH BAR	A	Y	2		
		GOH KITCHEN	GOH KITCHEN SINK	A	Y	2	Y	
		GOH MEN ONE	GOH FLOOR 1 MENS RM	A	Y	2		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
10832	WELL	2	WELL	A				
54407	HYDROPNEUMATIC STORAGE							
54409	ATMOSPHERIC STORAGE @ GELSTON HOUSE							
54411	BLADDER TANKS @ GELSTON HOUSE							

Certified Operator Information

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
KLOBUKOWSKI, STEVEN J.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2019

Contact Information

Name		Organization		Job Title		
Mr. Edward C. Blaschik		Goodspeed Opera House		Theatre Manager		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
6 Main Street		P O Box A		East Haddam	CT	06423
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0410334	GOODSPEED OPERA HOUSE			NTNC	150	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
6 MAIN ST (RTE 82)					1			
Towns Served: EAST HADDAM								
860-873-8664	326	860-873-2329		860-873-1089	ecb@goodspeed.org			

Contact Role(s): **Administrative Contact, Legal Contact**

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419193	NATHAN HALE-RAY MIDDLE SCHOOL			NTNC	620	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
73 CLARK GATES ROAD					1			

Towns Served: EAST HADDAM

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		10 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Arsenic (1005)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419193	NATHAN HALE-RAY MIDDLE SCHOOL			NTNC	620	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
73 CLARK GATES ROAD					1			

Towns Served: EAST HADDAM

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Organic Chemicals (VOCS)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION SURVEY REPORT	3/1/2020	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	A				
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		MS-01	NURSES OFFICE SINK	A	Y	1	Y	
		MS-02	MAIN OFFICE KITCHEN	A	Y	1	Y	
		MS-03	LIBRARY WORK ROOM	A	Y	1	Y	
		MS-04	STAFF BATH RM 223	A	Y	1	Y	
		MS-05	STAFF BATH RM 215	A	Y	1	Y	
		MS-06	GIRLS LOCKER ROOM	A	Y	1	Y	
		MS-07	BOYS LOCKER ROOM	A	Y	1	Y	
		MS-08	ART ROOM 210	A	Y	1	Y	
		MS-09	MUSIC ROOM 218	A	Y	1	Y	
		MS-10	KITCHEN	A	Y	1	Y	
		MS-11	CAFE FOUNTAIN	A	Y	1	Y	
		MS-12	STAFF ROOM 301	A	Y	1	Y	
		MS-13	FCS ROOM 304	A	Y	1	Y	
		MS-14	WORLD LANG RM 306	A	Y	1	Y	
		MS-15	CLASSROOM 607	A	Y	1	Y	
		MS-16	CLASSROOM 603	A	Y	1	Y	
		MS-17	CLASSROOM 801	A	Y	1	Y	
		MS-18	CLASSROOM 809	A	Y	1	Y	
		MS-19	CLASSROOM 704	A	Y	1	Y	
		MS-20	CLASSROOM 502	A	Y	1	Y	
		MS-21	CLASSROOM 505	A	Y	1	Y	
		MS-22	STAFF ROOM 510	A	Y	1	Y	
		MS-23	CLASSROOM 409	A	Y	1	Y	
		MS-24	CLASSROOM 406	A	Y	1	Y	
		MS-25	CLASSROOM 404	A	Y	1	Y	

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419193	NATHAN HALE-RAY MIDDLE SCHOOL			NTNC	620	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
73 CLARK GATES ROAD				1			
Towns Served: EAST HADDAM							

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
55598	WELL 2	2	WELL 2	A				
55600	WELL 3	2	WELL 3	A				
55604	TREATMENT PLANT							
55606	ATMOSPHERIC TANK							
55608	BLADDER TANKS							
55610	PUMP STATION							

Certified Operator Information

Water System Facility: **TREATMENT PLANT (WSF ID: 55604)**

Facility Classification: **CLASS 2 TREATMENT PLANT**

Operator Name	Operator Type	Certification(s)	Certification Expiration
NIGRO, JR., VICTOR N.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS III	6/30/2020
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2021
NIGRO, SCOTT A.	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	6/30/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020

Contact Information

Name				Organization			Job Title		
Mr. Brian S. Reas				East Haddam Public Schools			Superintendent.		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
26 Plains Road			P.O. Box 401			Moodus		CT	06469
Business Phone		Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-873-5090			860-873-5092			brian.reas@easthaddamschools.org			

Contact Role(s): **Administrative Contact, Legal Contact**

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0419223	CHESTELM ADULT DAY SERVICES, INC.			NTNC	39	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
542 TOWN STREET				2	1			
Towns Served: EAST HADDAM								

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/24		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 10/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Total Coliform (3100)		3 (TR) per month	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
Lead And Copper (PBCU)		5 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water Quality Parameters (WQPD)		2 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Lead And Copper (PBCU)		1 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/19 - 6/30/19		Complete

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419223	CHESTELM ADULT DAY SERVICES, INC.			NTNC	39	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
542 TOWN STREET			2	1			
Towns Served: EAST HADDAM							

Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Pesticides, Herbicides and PCBs - Phase II & V (SOCS) 1 routine (RT) per three years

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19	7/1-12/31	
	1/1/20 - 12/31/22		

Organic Chemicals (VOCS) 1 routine (RT) per year

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Water Quality Parameters - Basic (WQP1) 2 routine (RT) per six months

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	7/1/18 - 12/31/18		Complete

Water System Facility: WELL 1 (WSF ID: 59897)

E. Coli (3014) 1 triggered (TG) per period

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
WELL 1 (2)	10/18/18 - 10/24/18		Complete

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
CCTS 1: PWS TO RECOMMEND OCCT	12/31/2016	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	6/30/2017	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	6/30/2018	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2019	
SWTS 1: PWS TO RECOMMEND SOWT	6/30/2019	
CCTS 1: PWS TO RECOMMEND OCCT	6/30/2019	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	12/31/2019	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	12/31/2020	
CROSS CONNECTION SURVEY REPORT	3/1/2023	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
REVISED TOTAL COLIFORM RULE (RTCR)	11/19/18 - 11/20/18	3	2/28/2020	3/1/2019	3/9/2020	3/1/2019

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A				
		CADS1	KITCHEN SINK	A	Y	N	Y	
		CADS2	EMPLOYEE BATH	A	Y	N		
		CADS3	MED ROOM	A	Y	N		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0419223	CHESTELM ADULT DAY SERVICES, INC.			NTNC	39	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
542 TOWN STREET			2	1			

Towns Served: EAST HADDAM

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
		CADS4	HANDICAP BATH	A	Y	N		
		CADS5	CLIENT BATHROOM	A	Y	N		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
59897	WELL 1	2	WELL 1	A				

Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
ROWLEY, BRENDAN	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2019
		WATER TREATMENT PLANT OPERATOR - CLASS II	12/31/2019

Contact Information

Name				Organization		Job Title			
Mr. Mark Epright				Chestelm Health & Rehab Center		Cfo			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
534 Town Street			P.O. Box 719			Moodus		CT	06469
Business Phone		Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-873-6500		DLIN	860-873-2307		860-873-6500	mepright@chestelm.com			

Contact Role(s): **Administrative Contact, Legal Contact**

Name				Organization		Job Title			
Mr. Brinton Epright									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
			P. O. Box 548			Higganum		CT	06441
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
860-873-1455									

Contact Role(s): **Owner**

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

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